



09-08-04

IFW EAF

PATENT
Attorney Docket No.: 19932/3

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Eric Wade :
Serial No.: 10/068,626 : Art Unit: 3732
Filed: February 5, 2002 : Examiner: Ralph A. Lewis
For: PROPHYLACTIC SYSTEMS FOR :
DENTAL INSTRUMENTS AND :
METHODS FOR USING THE SAME :

Mail Stop: AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

1. Transmitted herewith is: Amendment in response to Office Action dated June 7, 2004, (8 pgs.); Terminal Disclaimer to Obviate a Double Patenting Rejection Over a Prior Patent (1 pg., in duplicate); and Return receipt postcard.

STATUS

2. Applicant
☒ claims small entity status.
☐ is other than a small entity.

CERTIFICATE OF MAILING/TRANSMISSION

**CERTIFICATE OF MAILING BY EXPRESS MAIL TO
THE COMMISSIONER FOR PATENTS**

Express Mail No.: EV504790784US

Date: September 7, 2004

I hereby certify that the documents listed above are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above in an envelope addressed to:
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: September 7, 2004

FACSIMILE

transmitted by facsimile to the Patent and
Trademark Office

Patrick W. Rasche
Reg No.: 37,916

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) _____ Applicant petitions for an extension of time under 37 C.F.R. 1.136
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
_____ first month	\$ 110.00	\$ 5.00
_____ second month	\$ 420.00	\$ 210.00
_____ third month	\$ 950.00	\$ 475.00
_____ fourth month	\$1,480.00	\$ 740.00
_____ fifth month	\$2,010.00	\$1,005.00

Fee: \$ _____

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

_____ An extension of _____ months has already been secured. The fee paid therefor \$_____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$_____.

OR

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY ADDITIONAL RATE FEE	OR	OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE
TOTAL	MINUS	=		x \$9 = \$		x \$18 = \$
INDEP.	MINUS	=		x \$43 = \$		x \$86 = \$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ \$145 = \$		+ \$290 = \$
				TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

(a) ☒ No additional fee for Claims is required

OR

(b) _____ Total additional fee for claims required \$

FEE PAYMENT

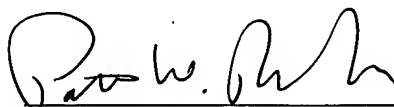
5. _____ Attached is a check in the sum of \$_____
- ☒ Charge Deposit Account No. 01-2384 the sum of \$_____.
A duplicate of this transmittal is attached.

FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

- ☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.
7. ☒ Other: the Commissioner is hereby authorized to charge to Terminal Disclaimer Fee under 37 CFR 1.20(d), of \$110.00 to Deposit Account No. 01-2384.



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